Tackling Obesity in India: A Call for Multidisciplinary Action

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The global burden of obesity has grown into a full-fledged epidemic, but its rapid rise in low- and middle-income countries such as India poses a unique public health challenge. Traditionally associated with affluence, obesity is now deeply rooted across diverse socioeconomic strata, affecting children, adolescents, adults, and even rural populations. The complexity of this metabolic condition necessitates a shift from a purely clinical viewpoint to a broader, multidisciplinary response, one that integrates preventive, therapeutic, and policy-driven approaches.

According to the National Family Health Survey-5 (2019–21), nearly one third of Indian women and men aged 15–49 are overweight or obese, a significant increase from previous surveys.(1) Urbanization, dietary shifts, sedentary lifestyles, and socio-cultural transitions have contributed to this surge. Yet, despite the mounting numbers, obesity continues to be under-recognized, under-diagnosed, and under-treated in clinical practice.

From a pathophysiological perspective, obesity is far more than excess adiposity.(2) It is a chronic, relapsing disease with deep metabolic and inflammatory underpinnings, contributing to the development of type 2 diabetes mellitus, hypertension, dyslipidemia, cardiovascular disease, osteoarthritis, infertility, and several malignancies. The interplay between genetics, epigenetics, gut microbiota, endocrine disruptors, and psychosocial factors further complicates its management.

What makes the Indian context particularly concerning is the “thin-fat phenotype”—where individuals may have a normal BMI but high visceral adiposity and metabolic risk.(3) Moreover, childhood obesity has emerged as an alarming trend(4), with long-term consequences on physical and mental health. School-based junk food exposure, screen addiction, and lack of physical activity are fueling a generation-wide health crisis.

Despite these facts, India lacks a cohesive national policy on obesity prevention. Fragmented interventions, such as fitness campaigns and sugar taxes, are not sufficient. What is urgently required is a multidisciplinary framework involving:

- Primary care physicians for early detection and counseling
- Endocrinologists and nutritionists for tailored metabolic management
- Mental health professionals to address obesity-related stigma and eating disorders
- Community medicine specialists and public health officials to design and implement population-wide strategies
- Policy makers to regulate food labeling, urban infrastructure, and school wellness programs

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Obesity must no longer be viewed as a consequence of individual behavior, but as a societal issue shaped by environmental, economic, and policy-level determinants. Medical curricula should also reflect this paradigm shift, equipping future healthcare professionals with the tools to manage obesity not just in clinics, but at the community and systems level.

As India continues to battle infectious diseases, rising non-communicable diseases like obesity threaten to become the silent pandemic of the 21st century. A coordinated, evidence-based, and inclusive strategy is the only way forward.

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